2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N05455

Entity Name: LAKE BRANTLEY CLUB HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

375 BRANTLEY CLUB PL
LONGWOOD, FL 32779 US

New Principal Place of Business:

Current Mailing Address:

375 BRANTLEY CLUB PL
LONGWOOD, FL 32779 US

New Mailing Address:

FEI Number: 59-2658967 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PROUSE, JOSEPH V
375 BRANTLEY CLUB PL
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: TD ( ) Delete
Name: KNOWLES, LISA
Address: 383 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779 US

Title: D ( ) Delete
Name: YOKOMI, MOH
Address: 339 MENASHE CT
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete
Name: SCHWABLE, JOEL
Address: 358 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete
Name: COATES, VICKY
Address: 391 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779

Title: D ( ) Delete
Name: MILLS, DEBBIE
Address: 1115 KOPRIL LN
City-St-Zip: LONGWOOD, FL 32779

Title: PD ( ) Delete
Name: PROUSE, JOSEPH V
Address: 375 BRANTLEY CLUB PLACE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: HAMILTON, MEL
Address: 333 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change ( ) Addition
Name: SCHWABLE, JOEL
Address: 358 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779

Title: SD (X) Change ( ) Addition
Name: COATES, VICKY
Address: 391 BRANTLEY CLUB PL
City-St-Zip: LONGWOOD, FL 32779

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH V. PROUSE PRES 05/01/2009
Electronic Signature of Signing Officer or Director — Date